

pay problems. Hospital Corporation of America (CHA) claims 20 percent of unpaid charges for its hospitals, I believe. Everyone knows that it's the rare hospital that doesn't market itself to Medicare patients. It is to the credit of serious mission-driven hospitals like those in CRA and VHA who have chosen not to play the game, but to get serious about accountability to the communities that provide them the opportunity to serve. It is also to the credit of AHA members who have decided to go far beyond the AHA criteria and establish their own improved benefit criteria and accountability processes.

On a policy note: Todd Sloane at Modern Healthcare suggests this week that Senate Finance Chair Max Baucus and Ways and Means Chair Charley Rangel have gone soft on non-profit accountability, so hospitals are breathing easy. He also suggests that Senator Chuck Grassley and the IRS ought to start shining their lights on not-for-profit health insurance plans and include reserves accumulation, executive compensation and other contributions to "rising medical costs." Just when we thought only the for-profit AHPs were big in compensation and profit. Go Dean Zerbe!

COMPARATIVE EFFECTIVENESS

How can we assure beneficiaries that they receive value for their money from medical technology, clinical procedures and services? It's basically a scientific analysis of varying alternatives to diagnostics and therapy, practiced in many ways by multi-specialty groups, HMOs, and some large health plans like the Blues and the VA healthcare system. The MedPAC staff analysis recommends consideration of one national entity to perform the service for all practices ala the National Institute for Health and Clinical Excellence (NICE) in the U.K. Commission members are split on the recommendation with a majority inclined to accept the idea with refinement and a vocal minority (including this member) suggesting that AHRQ be charged and funded by Congress with developing a policy pathway toward comparative and cost effectiveness. All of this would eventually be tied to payment systems as well as practices, and utilizing and encouraging existing practice-based research efforts around the country.

THE FEDERAL GOVERNMENT'S ROLE IN UNIVERSAL COVERAGE

The President and his administration once again made clear their position on consumer choice for America's healthcare. In reaction to the Citizens' Health Care Working Group's Report from September, 2006, the administration agreed with the group's overall goal of providing quality health care for all Americans, but disagreed on the strategy to get there.

According to HHS Secretary Mike Leavitt, the administration supports "an approach emphasizing consumer choice and options" rather than an approach "based on mandates and government intervention." The administration also rejected the idea of creating a single-benefit—defined by a federally appointed committee—for all Americans.

The Bush Administration believes in two principles: (1) Each state legislature can reflect the "insurance benefit" that people believe is best to secure the blessings of universal coverage; and (2) The federal spending role should be confined to supporting consumer choice in the form of tax credits/deductions rather than any direct spending.

The problem with (1) is that we are talking here about the income security of all Americans, not health benefit mandates which are often the work of the medical establishment. The challenge with (2) is that reliance on tax policy alone requires a transition from regressive subsidies to income-related sub-

sidies especially when tied to a mandate. I would assert an additional (3) in that I don't believe "universal insurance plan access" is the same as the promise of universal access to health and related services every American could enjoy if we ran a more efficient health care system.

WRONG WAY CALIFORNIA

Just as the rest of the country is looking to pay physicians to improve the value of health care delivery, California employers are moving their employees away from the recognized higher-performing health care systems towards PPOs. Independent consultant, Allan Baumgarten, in his recent California Health Care Market Report tells us that large employers are moving some of the 12+ million Californians in HMOs out to fee-for-service medical care. "All of this has physicians scrambling to retool themselves . . . faced with the need to change a culture that encouraged physicians to be conservative providing care and to be 'modest' in reporting the amount of care provided, into a culture focused on maximizing fee for service payments."

Meanwhile, in the business world, a new survey by Watson Wyatt Worldwide and the National Business Group on Health shows a tendency of employees to opt for more comprehensive coverage. Despite ever-increasing healthcare costs, most employers still offer a choice in health insurance to their employees, while a small percentage (5 percent) are forcing the health insurance decision by only offering a CDHP option.

COMMUNITY FORUMS PROVIDE OPPORTUNITY TO SHARE CONCERNS ON IMMIGRATION

HON. GABRIELLE GIFFORDS

OF ARIZONA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 29, 2007

Ms. GIFFORDS. Madam Speaker, I rise today to call on all Members of the House to listen to each other's concerns so that we can reach an agreement on comprehensive immigration reform.

I am proud to be a cosponsor of the bipartisan legislation authored by Congressman GUTIERREZ and Congressman FLAKE, H.R. 1645.

Recently, I held a teleconference forum with District business leaders, law enforcement officers, I.C.E. and Border Patrol agents, and representatives from the Arizona Department of Corrections and Governor Napolitano's office.

Their concerns included needing more help with the burden of incarcerating illegal immigrants, having trouble finding workers, and requiring assistance with a quick, easy-to-use employee verification system, among other issues.

Over the next two weeks in the district, I will be holding additional community forums, so people can tell me what they think needs to be done about our Nation's immigration crisis.

I look forward to hearing from members of my community on every side of the issue—immigrant rights activists, business leaders, the Minutemen, law enforcement, ranchers, and local residents.

Border Patrol Chief David Aguilar will also be joining me in the District to hear from folks on the front lines of this issue.

After listening to a range of experts and local residents, I will recommend possible improvements before we vote on any legislation.

What is clear to me is that the illegal immigration crisis is complex and impacts almost every aspect of our lives in Arizona. Therefore, a piecemeal approach will not work.

If we truly want to secure the border and end illegal immigration, we must pass a common-sense bill that will address every part of the problem.

HONORING MARY PAT ROBERTSON

HON. RUSH D. HOLT

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 29, 2007

Mr. HOLT. Madam Speaker, I rise today to recognize Mary Pat Robertson from Princeton. Ms. Robertson is celebrating her twentieth anniversary as Director of the American Repertory Ballet's Princeton Ballet School.

Under her leadership the Princeton Ballet School has evolved into one of the most acclaimed in the country, supporting over 1200 students annually at three locations. Ms. Robertson leads a faculty of forty supremely accomplished professionals, and works with them to mentor young dancers and to pass along techniques and artistry of classical ballet.

Audree Estey founded the Princeton Ballet School on the belief that dance is an empowering activity that will benefit students all their lives. Throughout the past twenty years, Ms. Robertson has built upon this premise and has expanded students' self-esteem, self-discipline, and fitness.

Mary Pat Robertson is also a choreographer. She has choreographed 25 years of work for her modern dance company, Teamwork Dance, along with many operas for the Opera Festival of New Jersey. For this work she received a Choreographic Fellowship from the New Jersey State Council of Arts, and has been honored by the Arts Council of Princeton as one of Princeton's most esteemed artists.

The arts are a vital contribution to a child's development and learning. Through dance, children have an opportunity not only to learn, but to participate in the culture of their community. These children whom Ms. Robertson has taught the arts will continue to thrive in society.

After 20 years as Director, Ms. Robertson still finds inspiration and satisfaction in a classroom of eager young dancers. I am proud to recognize Ms. Robertson on the occasion of her twentieth anniversary with the Princeton Ballet School.

RECOGNIZING NATIONAL SOCIAL WORK MONTH

HON. DANNY K. DAVIS

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 29, 2007

Mr. DAVIS of Illinois. Madam Speaker, I rise to recognize March as National Social Work Month. National Social Work Month affords the perfect opportunity to highlight the essential role that social workers play in working with all vulnerable populations. Social workers help all people at every stage of life, while promoting dignity for everyone, especially the most vulnerable among us.